

Review of

İçli et al, FIGHTING AGAINST CIGARETTE SMOKING AMONG MEDICAL STUDENTS: A SUCCESS STORY

Klatsky et al Moderate Alcohol Intake and Cancer: The Role of Under-Reporting

Jack Cuzick, PhD

Wolfson Institute of Preventive Medicine

St Bartholomew's Medical School

London, UK

FIGHTING AGAINST CIGARETTE SMOKING AMONG MEDICAL STUDENTS: A SUCCESS STORY

Ankara University
Oncology Research and Treatment Center
Antismoking Group

İçli F, Çalışkan D, Gönüllü İ, Akbulut H, Özkan A, Ölmez
Ş, Gönüllü U, Sunguroğlu K

Smoking Status of the Students at Ankara University Medical School in 2007 (229 student from 4th, 5th and 6th grade were surveyed)

	Number	Percent
Smoking Status		
Never Smoked	130	60.5
Quit Smoking	31	14.4
Still Smoking	54	25.1

- Smoking rate at 6th grade was % 35
- 60 % of smokers started smoking at Medical School

Smoking Status of Medical Students(2007)

(Ankara University, Medical School)

- 60 % of them started smoking during the Medical School years
- 29.5 % of males and 22.6 % of females were smoking
- Higher percentage of smokers have smoking family members when compared to non-smokers (66 % vs 38 %; $p < 0.01$)
- Higher percentage of smokers have smoking friends when compared to non-smokers (91.5% vs 56 %; $p < 0.01$)
- From the smokers, 44.4 % want to quit and 28.6 % asked for help to quit.

“Cigarettes or Health” lectures for 1st, 2nd and 3rd year students at the beginning of each year since 2010

■ The Main Theme of Brainwashing for Medical Students:

-Physicians are enormously valued **ROLE-MODELS** in the community

-SMOKING TOBACCO is the **LEADING CAUSE OF PREVENTABLE DEATHS**

-Therefore, PHYSICIANS SHOULD NOT SMOKE..

- Also, emphasis was placed on their role in smoking cessation of the patients if they don't smoke.
- While smokers were encouraged to quit, brainwashing focused mainly on **counteracting the influences to start smoking.**

Physicians lack of confidence related to his role in smoking cessation

Smoking status	Lack of confidence(%)	p
Smoker	34.2	
Non-smoker	14.5	<0.05

Icli F: J Cancer Education,1992;7:237-242

- Physicians may have higher influence in Smoking Cessation and Antismoking Campaigns if they don't smoke

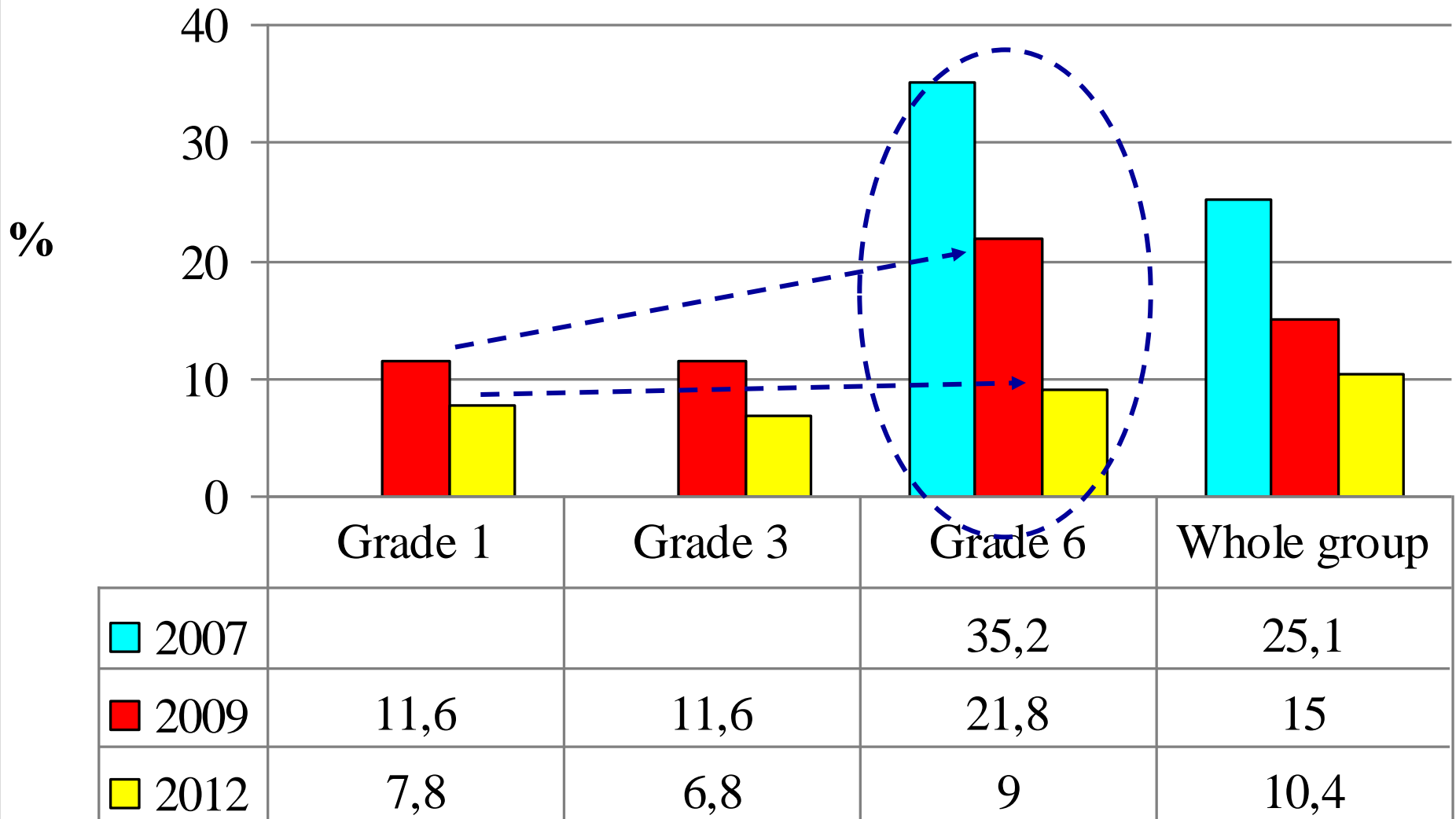
Act of Turkish Parliament No: 5727

“Legislation against prevention of the harms of tobacco products”

(Took full effect in 2009 and helped our efforts to reduce smoking rate among medical students and nurses)

- Smoking in all enclosed public places was prohibited
 - The ban included premises that serve hookah(water pipe)
 - Written warnings with pictures on cigarette packages became mandatory
 - A 50 TL fine was implemented for discarding cigarette butts or packages
 - All TV channels were required to make programs showing the harms of smoking for certain periods of their broadcast coverage
- ”As a result of campaigns against smoking, the rate of smoking has dropped to 27.1 % from 33.4 % in the last 6 years in Turkey” (Ministry of Health)

Smoking rates of the students at first, third and sixth grades of Ankara University Medical School



Changes in Smoking Rates Related to Sex in 5 Years

	2007(%)	2012(%)	p
Male	29.5	17.7	0.0167
Female	22.6	3.9	<0.0001

National Cigarette Consumption (2007)

Rank	Country	Cigarettes/adult/yr
1	Greece	3,017
5	Czech Republic	2,368
7	Russia	2,319
9	Spain	2,225
12	Japan	2,028
24	Austria	1,684
25	China	1,648
26	Hungary	1,623
27	Italy	1,596
30	Turkey	1,499
39	United States	1,196
42	Germany	1,125
60	France	876
65	United Kingdom	790
116	India	99

A L Klatsky, Y Li, D Baer, M A
Armstrong, N Udaltsova, G D Friedman

Kaiser Permanente Medical Center,
Oakland, Calif

Moderate Alcohol Intake and
Cancer: The Role of Under-
Reporting

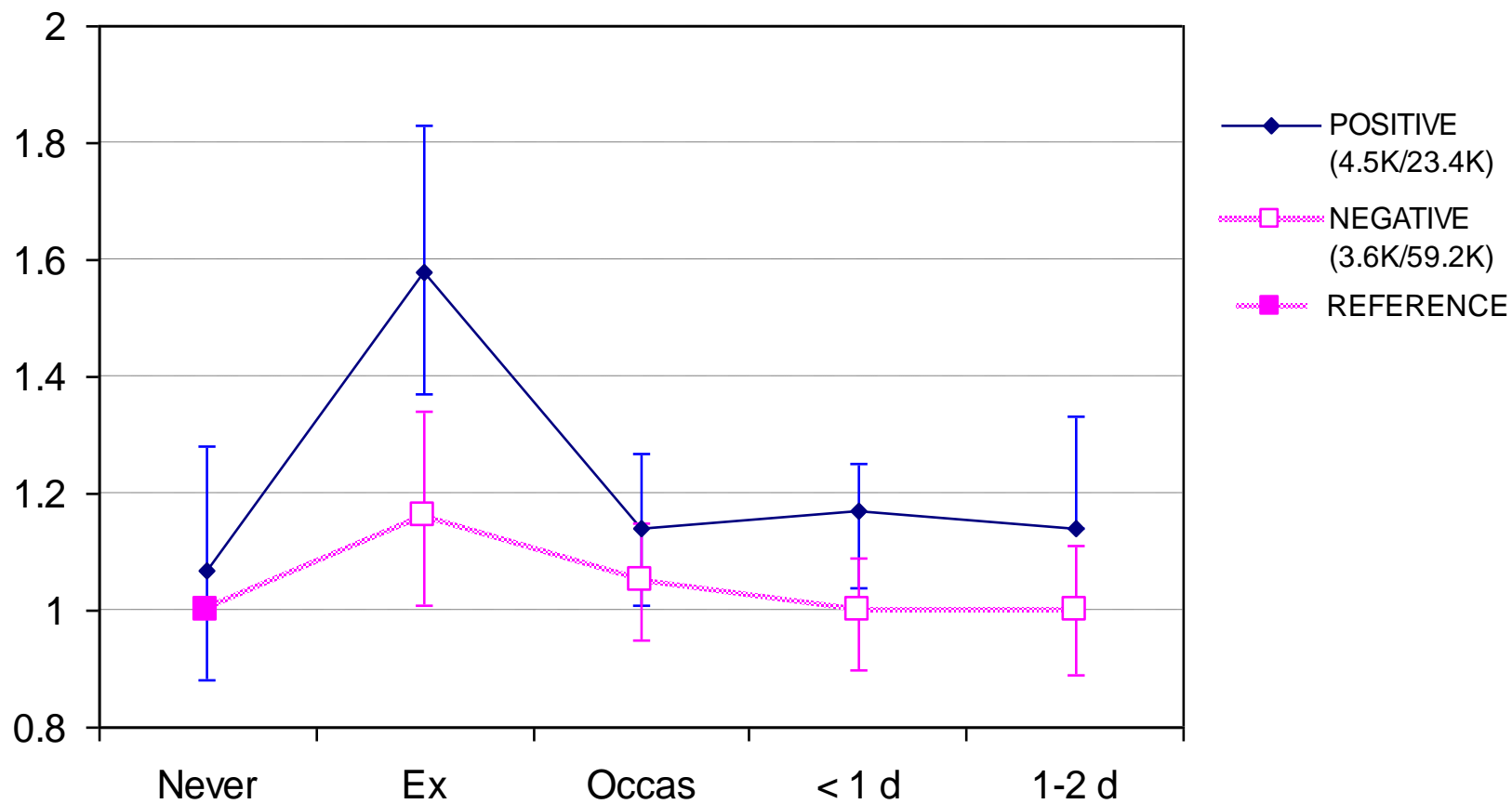
MODERATE ALCOHOL INTAKE AND CANCER: THE ROLE OF UNDER-REPORTING

Background & Purpose: Heavy drinking is related to increased risk of several cancer types, but the role of light-moderate drinking (< 3 drinks per day) is less clear. We explored the role of under-reporting as a factor affecting apparent higher cancer risk of lighter drinking.

Methods:

- **(1)** Cohort study in 129,987 persons; baseline alcohol data in 1978-85.
- **(2)** Multivariate Cox models for risk of any cancer and of alcohol-related cancers (UAD, esophagus, liver, breast, colo-rectum).
- **(3)** Persons reporting light-moderate intake stratified according to **suspicion of under-reporting** on basis of other reported alcohol data and/or alcohol-related diagnoses.

Drinking: Possible Underreporting: RR of Any Cancer - ALL



MODERATE ALCOHOL INTAKE AND CANCER: THE ROLE OF UNDER-REPORTING

Results

- Relative risks (RR) 95% CI for any cancer in all persons: **Exdrinkers = 1.17** (1.07-1.27, $p < 0.001$), < 1 drink/day = 1.05 (1.00-1.09, $p = 0.04$), 1-2 drinks/ day = 1.09 (1.04-1.14, $p < 0.001$), and ≥ 3 drinks/ day = 1.16 (1.09-1.24, $p < 0.001$).
- For persons reporting 1-2 drinks/day, the RR of any cancer among those suspected of under-reporting (POSITIVE in figure) was 1.14 (1.04-1.25, $p = 0.004$) and for those not suspected (NEGATIVE in figure) it was 1.00 (0.89-1.11). For persons reporting < 1 drink/day the RR for POSITIVE was 1.17 (1.06-1.28, $p = 0.001$); for NEGATIVE it was 1.00 (0.90-1.09). For the alcohol-related composite the POSITIVE/NEGATIVE disparity was similar.

Conclusions: Light-moderate drinkers had a slightly increased risk of cancer in a large cohort study, but this was concentrated in persons suspected of under-reporting.

Comment

- Issue of under-reporting of alcohol consumption well known
 - Use of computer questionnaire has been shown to help by 'anonymising' the response
- Under reporting over-estimates relative risks and under-estimates exposure but
Population Attributable Risk unaffected assuming no shifts from 'some' to 'never'